

Ph 1

Entry Blank—Please Type or Print

130

☐ Ms./Artist

☒ Mr./Artist

ALLEN McMICKLE

(last name last)

Permanent

Address

337 SOUTH ST

CHARDON

Street

City

44024

Daytime Tel. (216) 423-4446

Zip

area

Temporary or

Studio Address

Street

City

Daytime Tel. ()

Zip

area

If you do not presently live in one of the counties of the Western Reserve, in which county were you born?

Collaborator (if any)

If May Show entries are not accepted or are not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist at artist's expense:

Street

City

State

Zip

Special Instructions

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until August 6, 1989.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature

Allen McMickle

I have received the unsold/unaccepted object(s) in good condition.

Signature

Allen McMickle

Entry Blanks

A

- ☐ Paintings
☐ Sculpture

- ☐ Graphics
☐ Crafts

- ☒ Photography
(specify category)

Materials used (media): SILVER PRINT

Title YOU DON'T KNOW WHAT YOU'VE GOT...

Price or NFS

\$225

Insurance Value
if NFS Only

Size 24" x 12 1/2"
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

0

Total No. in
Edition

1

Price of Print
Unframed

Price of
Frame Only

ACCEPTED	DO NOT WRITE IN THIS SECTION (3) - 130 5 80a pr	ACCEPTED
X		X
NOT ACCEPTED		NOT ACCEPTED

B

- ☐ Paintings
☐ Sculpture

- ☐ Graphics
☐ Crafts

- ☒ Photography
(specify category)

Materials used (media): SILVER PRINT

Title

A DAY IN THE LIFE

Price or NFS

\$65

Insurance Value
if NFS Only

Size 5" x 7 1/2"
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

0

Total No. in
Edition

1

Price of Print
Unframed

Price of
Frame Only

ACCEPTED	DO NOT WRITE IN THIS SECTION (3) - 131 5 80a pr	ACCEPTED	REC'D
X			
NOT ACCEPTED		NOT ACCEPTED	DATE
		X	

Detach entire portion along dotted line and submit with slides, but retain tags

1989 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

ALLEN McMICKLE

Name

337 SOUTH ST

Address

CHARDON

OH

44024

•City & State

Zip

Notification #2

**Do Not
Detach**

A

☐ Paintings

☐ Graphics

☒ Photography

☐ Sculpture

☐ Crafts

Title

YOU DON'T KNOW WHAT YOU'VE GOT

DO NOT WRITE IN THIS SECTION

(3) -130

ACCEPTED

X

NOT ACCEPTED

B

☐ Paintings

☐ Graphics

☒ Photography

☐ Sculpture

☐ Crafts

Title

A DAY IN THE LIFE

DO NOT WRITE IN THIS SECTION

(3) -131

ACCEPTED

NOT ACCEPTED

X

Return of Objects

Not Accepted: June 20-24

Accepted: August 15-19

It is understood that the Museum shall have the right to dispose for its own account any object not called for by the dates listed.

THIS IS YOUR ONLY RECEIPT TO CLAIM YOUR OBJECT

Do Not Detach